

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

10/525758

1 Date of Request: _____		2 Serial/Patent # _____	
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3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$

	7 TOTAL AMOUNT OF REFUND	\$
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10 REASON:	8 TO BE REFUNDED BY:						
Overpayment	Treasury Check						
Duplicate Payment	Credit Deposit A/C #:						
No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px; text-align: center;">--</td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>			--			
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11 REFUND REQUESTED BY:	
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TYPED/PRINTED NAME: _____	TITLE: _____
SIGNATURE: _____	<small>Repln. Ref: 07/20/2005 PKIDWELL 0019593600</small> <small>Office/Att: Name/Number: 10525758</small> <small>FC: 9204</small> <small>\$500.00 CR</small>
OFFICE: _____	

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____	DATE: _____
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: